

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015949

FILED
Jan 19, 2009
Secretary of State

Entity Name: HINDSIGHT ENTERPRISES, LLC

Current Principal Place of Business:

C/O ALAN W. LEVINE, ESQ.
1110 BRICKELL AVENUE, 7TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

ALAN W. LEVINE, ESQ.
1110 BRICKELL AVENUE, SUITE 700
MIAMI, FL 33131 US

Current Mailing Address:

C/O ALAN W. LEVINE, ESQ.
1110 BRICKELL AVENUE, 7TH FLOOR
MIAMI, FL 33131

New Mailing Address:

ALAN W. LEVINE, ESQ.
1110 BRICKELL AVENUE, SUITE 700
MIAMI, FL 33131 US

FEI Number: 02-0688417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, ALAN W ESQ.
1110 BRICKELL AVENUE, 7TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

LEVINE, ALAN W ESQ.
1110 BRICKELL AVENUE, SUITE 700
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALAN W. LEVINE

01/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEVINE, ALAN W
Address: 1110 BRICKELL AVE., 7TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEVINE, ALAN W
Address: 1110 BRICKELL AVE., SUITE 700
City-St-Zip: MIAMI, FL 33131 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALAN W. LEVINE

MGR

01/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date